

2023 Iowa Youth Survey

Parental Consent Fulfillment Attestation

SCHOOL DISTRICT NAME

I attest to understanding the requirements for the district-wide collection of consent from a parent or legal guardian of any and all students who participate in the 2023 Iowa Youth Survey. I agree to engage my school district in the collection of written and/or electronic parental signatures prior to administering the 2023 Iowa Youth Survey to students.

District Superintendent Signature _____

District Superintendent Name Printed _____

Date _____